



PTO/SB/17 (05-07)

Approved for use through 05/31/2007. OMB 0651-0032

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2007☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 60

Complete if Known

Application Number	10/716,893
Filing Date	11/18/2003
First Named Inventor	Peterson
Examiner Name	Kiran K. Shrestha
Art Unit	2109
Attorney Docket No.	206,270

METHOD OF PAYMENT (check all that apply)☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 01-0035 Deposit Account Name: ABELMAN,FRAYNE&SCHWAB

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, **except for the filing fee**☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25

Each independent claim over 3 (including Reissues)

200	100
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Multiple dependent claims

360	180
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Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
20	- 20 or HP = 0	x	= 0

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
2	- 3 or HP = 0	x	= 0

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)
	0

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
38	- 100 = 0	/ 50 = 0 (round up to a whole number) x	=	0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

0

Other (e.g., late filing surcharge): Extension of time of one month, small entity

60

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 36,223	Telephone 212-949-9022
Name (Print/Type)	Anthony J. Natoli		Date 05/30/2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Peterson Examiner: Kiran K. Shrestha

Application Number: 10/716,893 Art Unit: 2109

Filing Date: November 18, 2003

Title: INTERACTIVE RISK MANAGEMENT SYSTEM AND METHOD

STATEMENT OF FILING BY EXPRESS MAIL 37 C.F.R. SECTION 1.10

This correspondence is being deposited with the United States Postal Service on May 30, 2007 in an envelope as "Express Mail Post Office to Addressee" Mail Label Number ER 059 678 715 US addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PETITION FOR A ONE-MONTH EXTENSION
OF TIME PURSUANT TO 37 C.F.R. § 1.136(a)

We request that the three-month response term to the current office action dated January 30, 2007 in the above-captioned application be extended one month from April 30, 2007 to May 30, 2007. We enclose a check for the requisite small entity fee of \$ 60. Please charge any additional fees and credit any overpayment to Deposit Account Number 01-0035.

06/01/2007 SSITHIB1 00000006 10716893

01 FC:2251

60.00 OP

Respectfully submitted,

Anthony J. Natoli
Registration number 36,223
Attorney for applicants

Date: May 30, 2007

ABELMAN, FRAYNE & SCHWAB
666 Third Ave., 10th Floor
New York, NY 10017-5621
Tele: (212) 949-9022
Fax: (212) 949-9190